



Population Health Webinar notes

Tuesday, February 26, 2019

Lou Saadi, PhD | Bureau of Epidemiology and Public Health Informatics

Slide 3:

KDHE is continuing to monitor for influenza-like illness in outpatients using sentinel clinics in all regions of the state. We are also monitoring emergency department visits and hospitalization due to influenza. This data is published weekly on the KDHE website at the following URL: <http://www.kdheks.gov/flu/surveillance.htm>. Kansas is still at widespread influenza activity but we are still lower in percentage of influenza-like illness in outpatient settings and ED visits compared to the last two flu seasons.

Historically influenza has peaked in January – February in Kansas but because we are starting to see an increase in H3N2 we may continue to see increases in flu activity through March. There have been 21 deaths with influenza as the direct cause of death reported so far this season and we have had two schools close this past week due to many children being ill with influenza.

It is not too late to get vaccinated, therefore, KDHE encourages everyone to make sure they are vaccinated to prevent influenza.

Slide 4:

While there has been attention in the media recently related to outbreaks of measles in multiple states, the Kansas Department of Health and Environment (KDHE) can verify that there are no current outbreaks of measles in Kansas. There have been five outbreaks of measles in the United States reported in 2019 in the following states: New York (three outbreaks, including one in New York City and two in other counties), Washington and Texas. All outbreaks are linked to international travel with subsequent transmission occurring in the United States in primarily unvaccinated populations. Currently we have no reported cases of measles in Kansas.

Ensuring vaccination with MMR prior to international travel is recommended and vaccination against all vaccine preventable diseases including measles can keep persons and communities well.

Slide 5:

KDHE has been receiving an increased number of reports of gastrointestinal illnesses. This is very common for this time of year when norovirus is circulating. To report a food complaint, go to the Food Safety Kansas website at <http://www.foodsafetykansas.org/>.

FYI on vacant Foodborne Epidemiologist Position: Lindsey Webb has left KDHE for another position. If you were contacting Lindsey directly about any foodborne or other outbreaks, please email the epi hotline. We wish her well and hope to be able to announce a new foodborne epidemiologist soon.

Slide 6:

- Kansas Syndromic Surveillance Program (KSSP) is now receiving data from 20 of the 30 emergency departments in High Density Drug Trafficking Areas (counties) in Kansas.
- Overall 54 percent of Kansas hospitals, covering about 74% of ED visits are in ESSENCE.
- The Syndromic Surveillance learning collaborative held its pilot project launch in early February. Junction City-Geary County is working with four adjacent health departments. KSSP has proposed adding ED data from three more hospitals to the Biosense feed: Newman Regional, Atchison Hospital. McPherson Hospital.
- Counties that received KDHE grants on Opioids and need morbidity/mortality statistics should email: KDHE.HealthStatistics@ks.gov.

Slide 7:

- The report on the 2017 PRAMS data is nearly ready for release.
- While sub-state analyses are unlikely due to sample size, staff are still looking for topics for reporting or researchers wanting to study the PRAMS data.
- Contact KDHE.PRAMS@ks.gov to inquire about data analyses for PRAMS.

Slide 8:

KDHE now has Hospital emergency data for three calendar years. Data for 2015-2017 are coded using the same clinical classification system as used for hospital discharge data. ED visits to Kansas residents typically number about 900,000 per year among the state's hospitals. For more information visit the KIC site.

Slide 9:

During January and February 2019, several indicators within the Kansas Health Matters (KHM) system were updated with the most current information available. These indicators include Mortality, Years of Potential Life Lost (YPLL), Natality, Medicare 65 Part D Beneficiaries of Opioid Prescriptions and BRFSS information.

All these newly updated KHM indicators are available for review at <http://www.kansashealthmatters.org/>.

Slide 10:

As previously mentioned, with the new Childhood Blood Lead Prevention grant, we will be offering paid scholarships to people interested in becoming Elevated Blood Lead (EBL) Certified Investigators. These are the folks who will be certified by KDHE to do in-home inspections for sources of lead exposure, which includes being able to take soil and paint samples from the home for testing. Ideally, we would like at least one EBL Investigator for each of the 16 Preparedness Regions, but we do have the funds to support more. The scholarships will cover the cost of the multi-day training and may be able to cover the cost of travel expenses as well.

For those of you who order blood lead testing supplies, specifically the filter paper, from the Kansas Health and Environmental Laboratories - we wanted to inform you of an upcoming change. KHEL will be phasing out the use of filter paper for blood lead testing in April. The move away from filter paper is for many reasons, including the limited number of companies that produce the filter paper, the amount of time it takes to analyze samples on filter paper and, most importantly, the accuracy of filter paper versus other methods. KHEL will move toward supplying local health departments with EDTA microtainer tubes that can be used to still collect capillary samples from a finger stick. More information will be coming, including a training video on how to collect blood samples using the EDTA microtainer tubes.

For questions about either of these items, please contact Jessica Willard at Jessica.Willard@ks.gov.

Slide 13:

The KDHE IRB will be convening this quarter on Friday, March 29th at 10:00am in Topeka.

If you have an upcoming project that qualifies as “human subjects research” and you use data that you have requested from KDHE, or KDHE is a partner, or if we are funding all or part of the project, please submit your project to the KDHE IRB.

If you have any questions about whether your project qualifies as “human subjects research,” or if you need the form requesting IRB review, please email Farah.Ahmed@ks.gov.

Philip Harris, MA, CHES® | Bureau of Health Promotion

Good Morning. Here are some updates, training opportunities and things the Bureau of Health Promotion wants to help you be aware of.

Slide 41:

The Violence and Injury Prevention Section wants to invite you and your local partners to take part in a Crime Prevention Through Environmental Design training; it is completely free and will be in Olathe at the end of March. To register or if you have questions please email Vanessa Aragon.

Slide 42:

Also from the Violence and Injury Prevention Section, Safe Kids Kansas wants to make you aware that, on a National call earlier this month, they were told that other states had begun to see counterfeit or fake car seats. NONE have been seen or reported in Kansas. Car Seat Installation techs have been made aware and we are asking that if you see any to contact Cherie Sage.

Slide 43:

A little more on the counterfeit car seats. The other states that have seen them shared these pictures and asked that we share them with you so you can help spot them more easily. The four things bulleted below usually raise a red flag the quickest. Keep an out for these when looking at car seats. Beginning with the picture on the far left

1. The triangle piece in her hand is plastic. It should be metal and should not be flexible like that.
2. There are no metal components and nowhere for a latch to connect to in this buckle.
3. The safety warnings are poorly written, are in a language other than English or just don't make sense. This label reads WARNING: Please use safety belts immediately after your baby can sit up by himself. WARNING: Keep product away from Fire.
4. Missing labels. Federal law requires every car seat to have several different labels that have very specific information.

Again, if you have any car seat related questions please reach out to Cherie Sage. She is our Safe Kids Kansas Coordinator and she will be more than happy to speak with you.

Slide 44:

In March, there are a couple of awareness days that we want to make you aware of and share with you some things you might consider doing in your communities. First is Severe Weather Awareness Week March 3 – 9. There are a few different things you can do personally and encourage those around you to do. A few ideas are on the slide.

March 17 – 23 is Poison Prevention Week - again a few quick and simple things you can do.

Slide 45:

The Community Clinical Linkages section wanted to share with you about the Kansas Community Health Worker Coalition, whose website is <https://kschw.org/>. They have a few different committees that meet various times and ways across the state that you can check out if you're interested. Any specific questions about the CHW Coalition can be sent to Lauren Lauridsen at Lauren.Lauridsen@ks.gov.

Slide 46:

The Chronic Disease Alliance of Kansas had their annual meeting and wanted to share with you in case you were unable to attend a few of the things that were presented and shared.

- Oral Health KS and the Community Care Network of KS (formerly KS Association for the Medically Underserved) provided information on how oral health impacts chronic diseases (and vice versa) and discussed integration of dental services into physical health practices.
- Committee breakout discussions helped identify ways each committee could take this new information back into their work to better engage the dental profession in chronic disease prevention and management. The Committees include: Primary Prevention, Education, and Health Systems.
- Breakout sessions included: the American Diabetes Association (resources and information on the brand new [Know Diabetes by Heart](#) campaign in collaboration with the American Heart Association), the [Kansas Prescription Drug Card](#) program (a free resource available to all Kansans aimed at helping reduce costs of medications), the KDHE Primary Care & Rural Health Program Director (2017 Kansas Health Professional Underserved Areas Report, background on additional programs, including the Kansas Rural Health Information Source (KRHIS) found here: <http://www.kdheks.gov/olrh/KRHIS.htm>), and the KDHE Opioid Overdose Prevention Program Manager (state perspectives and approaches for opioid misuse prevention).

Slide 47:

Another Chronic Disease Self-Management Leader Training is coming up; information is on the slide. Questions can be directed to Jessica McGinnis.

Slide 48:

The Kansas Cancer Partnership had their meeting and wanted to share these highlights and invite you to learn more about the partnership on their website - <http://kscancerpartnership.org/>.

Slide 49:

Since we are talking about cancer, it is worth mentioning that March is also Colorectal Cancer Awareness Month. Here are some of the key things that the program will be doing and they invite you to do likewise.

Slide 50:

The Community Health Promotion Summit was in Manhattan and was a tremendous success. It looks like next year's will be in Wichita. More information will be shared as more details become available.

Slide 51:

During the Community Health Promotion Summit, the Governor's Council on Fitness presented awards to individuals and organizations as Kansas Health Champions. This year's awardees include Pastor Adrion Roberson and Jody Hoener (honorable mention) for the individual award, and the Monarch Cement Company and City of Emporia (honorable mention) for the organizational award.

Slide 52:**[Tobacco Guideline for Behavioral Health](#)**

The Guideline is designed as a road map for providers to support their clients who are motivated to end their dependence on tobacco products. The Guideline is based on 12 essential strategies and includes a list of resources to assist providers in adopting specific practices that integrate tobacco cessation with other behavioral health treatment. We invite health care providers and their associations to endorse the Guideline as an aspirational statement. [Click here](#) to see *which provider agencies and associations have endorsed the Tobacco Guideline*.

[Tobacco Guideline Self-Assessment](#)

This self-assessment tool is a companion document modeled on the 12 strategies in the Tobacco Guideline for Behavioral Health. Health care providers may use the tool to estimate the extent to which the strategies are being implemented and to describe how implementation is taking place. Completing the self-assessment will help providers identify the gaps in addressing the Tobacco Guideline.

[Implementation Toolkit for the Kansas Tobacco Guideline for Behavioral Health Care](#)

This is an 85-page companion document for health care providers (both behavioral health care and primary care providers) providing detailed guidance for implementing each of the 12 strategies outlined in the Tobacco Guideline for Behavioral Health. The online version of the Toolkit available here includes links to dozens of additional

resources. A limited number of print copies will also be available. [Contact NAMI Kansas](#) for more information.

Please note that the next Webinar will be March 26, 2019 at 10am.